| • | | | | | | | , | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|------------------|--------------------------|------------------------------|------------------------|----|---------------------|------------------------|--|
| | | | | | | | Application or Docket Number | | | | | |
| PATENT APPLICATION FEE DETERMINATION RECO | | | | | | | | | | | | |
| Effective December 29, 1999 | | | | | | | 11609/590211 | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SM/ | | ENTITY | OR | OTHER SMALL | | |
| FOR | | NUMBE | R FILED NUMBER EXTRA | | XTRA | RA | ΓE | FEE | | RATE | FEE | |
| BASIC FEE | | | And the second of the second o | | | | · | 345.00 | OR | | 690.00 | |
| TOTAL CLAIMS | | 34 | minus 20= • (| | | X\$ | 9= | | OR | X\$18= | <i>2</i> 88 | |
| IND | EPENDENT CL | AINTS 6 | minus 3 = 1 3 \ | | | ХЗ | 9= | · | OR | X78= | 234 | |
| MULTIPLE DÈPENDENT CLAIM PRESENT | | | | | | +13 | 0= | | OR | +260= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | AL | · · · · · | OR | TOTAL | 1212 | |
| CLAIMS AS AMENDED - PART II | | | | | | | - 1. | | | OTHER | | |
| (Column 1) (Column 2) (Column 3) | | | | | | SM | ALL I | ENTITY | OR | SMALL I | | |
| AMENDMENT A | Ĉ. | CLAIMS REMAINING AFTER AMENDMENT | aki sa | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | ΓE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| MON | Total | . 3/0 | Minus | ··. 36 | 2 | X\$ | 9= | | ુલ | X\$18= | , | |
| 4ME | Independent | • 6 | Minus | 6 | = | x | ₹= | | OR | X78= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +13 | 0= | | OR | +260= | | |
| | | | | | | | OTAL | <u> </u> | | TOTAL | | |
| 0.16 64 10.1 10.1 | | | | | | ADDIT. FEE OR ADDIT. FEE | | | | | | |
| - | 2-19-04 | (Column 1) CLAIMS | 11.00 | (Column 2) HIGHEST | (Column 3) | | | ADDI- | | | ADDI- | |
| ENDMENT B | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | TE | TIONAL FEE | | RATE | TIONAL FEE | |
| Š | Total | . 24 | Minus | "36 | = | X\$ | 9= | | OR | X\$18= | | |
| AME | Independent | • 3 | Minus | *** 6 | = ~ | ХЗ | 9= | | OR | X78= | | |
| F | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | +13 | 0= | | OR | +260= | | |
| | | | | | | | OTAL | | OR | TOTAL ADDIT. FEE | | |
| (Column 1) (Column 2) (Column 3) | | | | | | ADDIT | ree | | | ADDIT. PEE | | |
| 广 | | CLAIMS | | HIGHEST | | | | ADDI- | 1 | | ADDI- | |
| ENTC | | REMAINING AFTER AMENDMENT | | NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RA | TE | TIONAL FEE | | RATE | TIONAL FEE | |
| AMENDMENT | Total | • | Minus | •• | = | X\$ | 9= · | | OR | X\$18= | | |
| ME | Independent | • | Minus | *** | = . | ХЗ | 9= | | OR | X78= | | |
| Ľ | FIRST PRESE | NTATION OF M | ULTIPLE DEF | PENDENT CLAIM | | · | | | 1 | <u> </u> | | |
| 1. | If the entering set | ımın d İndans Absıs A | ho onto in cat. | imn 9 weita "A" in a | Numa 3 | +13 | | | OR | +260= | | |
| "If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE | | | | | | | | | | | | |
| ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |